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## IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF ALABAMA EASTERN DIVISION

COLONY INSURANCE COMPANY,	)	•
Plaintiff,	. )	CASE NO. 3:06 ev 555-VPM
v.	ý	
RONSHABUS GRIFFIN and HPC	)	
ENTERTAINMENT GROUP, INC.,	)	
Defendants	)	

# RESUBMISSION OF AFFIDAVIT OF RONSHABUS GRIFFIN

Comes now the Defendant, Ronshabus Griffin, and resubmits his Affidavit which was filed in support of his Motion for Summary Judgment in the above styled case. The purpose of this resubmission is to submit the attached exhibits to the Affidavit, which exhibits were inadvertently omitted when the original Affidavit was filed. The exhibits are attached to the Affidavit, as resubmitted.

/s/John I. Cottle, III JOHN I. COTTLE III (COT004) Attorney for Defendant Ronshabus Griffin

OF COUNSEL:
Bowles & Cottle
Attorneys at Law
P.O. Box 780397
2 So. Dubois Avenue
Tallassee, Alabama 36078
(334) 283-6548
Fax: (334) 283-5366
(Email) BowlesandCottle@aol.com

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### **CERTIFICATE OF SERVICE**

I hereby certify that on April 26, 2007, I electronically filed the forgoing with the Clerk of Court using the CM/EMF system which will send notification of such filing to the following:

Algert S. Agricola, Esq. Jason J. Baird, Esq. SLATEN & O'CONNOR, P.C. Winter Loeb Building 105 Tallapoosa Street Suite 101 Montgomery, Alabama 36104

Albert C. Bulls III
Attorney at Law
P. O. Box 1233
Tuskegee Institute, Alabama 36087

/s/John I. Cottle III Of Counsel Case 3:06-cv-00555-MEF-WC

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STATE OF ALABAMA ) ELMORE COUNTY )

## AFFIDAVIT OF RONSHABUS GRIFFIN

I, Ronshabus Griffin, having been duly sworn, do hereby depose and say on oath as follows:

I am a resident of Elmore County, Alabama. On November 6, 2005, I and a few of my friends went to the Soul Inn, which is a club near Tuskegee, Alabama, owned by HPC Entertainment Group, Inc. When we arrived at the Soul Inn, there were security personnel searching people who entered the premises. These security personnel had metal detectors which they were using to conduct searches. I, and the party I was with, were all searched before we were allowed admittance to the premises.

While we were inside the Soul Inn, a firearm was discharged by an unknown person. I did not see the firearm being discharged, nor did I see who discharged the firearm. I did hear the shots. I was hit by one of the shots. Neither I nor any member of my party had been involved in any altercation with the gunman or with anyone else in the club that evening. I have no idea why the gunman fired the weapon.

Immediately after the shooting, I and my friends exited the Soul Inn. I was later taken to Tallassee Community Hospital where I was treated in the emergency room and admitted. I was discharged from the Tallassee Community Hospital on November 11, 2005 and taken directly to Jackson Hospital in Montgomery where I was admitted and remained until November 19, 2005. I incurred medical expenses at Community Hospital of \$30,182.96, and medical expenses at Jackson Hospital of \$32,834.00. Copies of these

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medical bills are attached hereto. In addition to these bills, I also incurred other medical expenses from doctors and other medical providers.

I make this Affidavit based upon my own personal knowledge.

RONSHABUS GRIFFIN

SWORN TO AND SUBSCRIBED before me this

Susan D. Bice Notary Public, Alabama State at Large My commission expires Merch 24, 2010 04/26/2007 08:18 NEPTUNE ACCT DEPT PAGE 05/20 3342837444

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66/05/06 09:50 Monday Community Hospital

FATIENT ACCOUNT DETAIL 623236 GRIFFIN RONSHABUS

PAGE 1 **H5ARDET** 

COMMUNITY HOSPITAL 805 FRIENDSKIP ROAD

TALLASSEE AL 36078-1225

PHONE: 334-283-6541 TAX ID#: 630047680

PATENT------BILLING INFORMATION 1 NUM/NAME-: 623236 GRIFFIN RONSHABUS

2 SEX----: M

16 CREDIT----; HOSP DRG. .: 486

17 EILL----:

18 CYCLE----: 3

FINAL DRG.:

BENEFITS ASSIGNED

4 DOCTOR---: 011300 DURDEN JIM 19 STAY TYPE-: 1 I/P 5 MARITAL--: S

20 SERVICE---: S

21 INSURANCE-: B BLUE CROSS IP

ADMISSION-----

GUARANTOR-----

10 NAME----: GRIFFIN RONSHABUS D 22 DATE----: 11/06/05

11 ADDRESS-1: 110 WALLAMATCHEE

3 EIRTH---: 11/10/1980

6 SOC.SEC.-: 418294927

23 CODE-----: D

12 ADDRESS-2:

DISCHARGE-----

13 CITY/ST--: TALLASSEE AL14 ZIP----: 36078

25 DATE----: 11/11/05 5 DAY STAY

15 PHONE----; 3342823913

26 CODE----: J

A/E	SERV	TYPE		CHG/REC					MED	
DA.TE	DATE	TRAN	CODE	NUMBER	QTY	DESCRIPTION	Charge	CREDIT	NECESSARY	CPT
11/06/05		CHG	305	£285023	1.00	HEMOGRAM -III	35.00			85025
11/06/05		CHG	301	8280054	1.00	COMPREHENSIVE METABOLIC PANEL	49.00			80053
11/06/05		CHG	301	8244428	1.00	ALCOHOL (ETOH) BLOOD	50.00			B2055
11/06/05		CHG	300	228010 <u>1</u>	1.00	RAPID URINE DRUG SCREEN	67.00			80100
11/06/05		CHG	302	8286900	1.00	.ABO	14.00			86900
11/05/05		CHG	302	E255036	1.00	ANTIBODY SCREEN	9.00			86850
11/06/05		CHG	302	8255069	1.00	.CROSSMATCH	163.00			86920
11/06/05		CHÇ	302	8255069	1.00	.CROSSMATCH	163.00			86920
11/06/05		CHG	302	8255069	1.00	.CROSSMATCH	163.00			86920
11/06/05		CHG	302	8255069	1.00	.CROSEMATCH	163.00			86920
11/06/05		CHG	324	6172231	1,00	CHEST 1/VIEW	80.00		•	71010
11/06/05		CHG	320	8170375	1.00	KUB	100.00			74000
11/06/05		CHG	324	8172231	1.00	CHEST 1/VIEW	80.00			71010
11/06/05		CHG	320	8170375	1.00	KUB	100.00		•	74000
11/06/05		CHC	305	8285023	1.00	HEMOGRAM -III	35.00		į.	85025
11/06/05		CHG	301	8243479	1.00	BASIC METABOLIC PANEL	38.00		{	30048
11/06/05		CHG	450	8653670	1.00	URINARY BLADDER CATH SIMPLE	57.00			51701
11/06/05		CHG	450	8690784	1.00	IV PUSH/SINGLE OR INITIAL	75.00		9	90774
11/06/05		ĊHG	450	8690471	1.00	TEX TOXOID	10.00		9	90471
11/06/05		CHG	450	8699291	1.00	CRITICAL CARE, 1ST HOUR	560.00		2	9929125
11/06/05		CHG	301	8377150	1.00	BLOOD GAS ANALYSIS	89.00		8	32803
11/06/05		CHG	390	8259021	1.00	.RBC UNIT	350,00		F	9021
11/06/05		CHG	391	8249286	1.00	.BLOOD/ PRODUCTS ADMIN FEE	86.75		3	643D
11/05/05		CHG	324	8172231	1.00	CHEST 1/VIEW	80.00		7	1010
11/06/03		CHG	270	€380461	1.00	AMEU BAG	55.75			
21/06/05		CHG	270	8380446	1.00	HME FILTER	19.00			
11/06/05		CHG	460	8377137	1.00	VENTILATOR INITIAL	134.50		9	4656
11/06/05		CHG	270	8380271	1.00	VENT CIRCUIT	29.50			
11/08/05		CHG	730	8860058	1.00	VENTILATOR INITIAL VENT CIRCUIT EKG CK-MB TROPONIN I	72.50		9	3005
11/06/05		CHG	301	8282553	1.00	CK-MB	53.00		8	2553
21/06/05	•	CHG	301 8	32446770	1.00	TROPONIN I	46.00		8	4484
11/06/05		CHG	301	8377150	1.00	BLOOD GAS ANALYSIS	89.00		8	2803
21/06/05		CHG	250	7924640	1.00	ROCEPHIN (CEFTRIAXONE): 1 GM VIAL	177.01		J	0696

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Community Hospital

PATIENT ACCOUNT DETAIL 623236 GRIFFIN RONSHABUS

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COMMUNITY HOSPITAL 805 FRIENDSHIP ROAD

TALLASSEE

AL 36078-1225

PHONE: 334-283-6541 TAX ID#: 630047680

A/R	SERV TYP	Ē	CHG/RE	<u>.</u>				MED
DATE	DATE TRA	n codi			DESCRIPTION	CHARGE	CREDIT	NECESSARY CPT
					DESCRIPTION			
11/06/05	CHG	258	7931660	1.00	SOD CHLORIDE 0.9%:50 ML	27.50		
11/06/05	CHG	258	8530032	2.00	LACTATED RINGERS: 1000 ML	69.16		J7120
11/06/05	CHG	730				72.50		93005
11/06/05	CHG	250	7927270	3.00	LOPRESSOR (METOPROLOL): 5 MG AMP	57.15		
11/06/05	CHG	480	8171589	1.00	US CARDIAC DOPPLER	322.00		93320
11/06/05	CHG	480	8172561	1.00	US DOPPLER COLOR FLOW MAPPING	600.00		93325
11/06/05	CHG	480	8172562	1.00	US ECHO 2D W/O COLOR FLOW	570.00		93307
11/06/05	CHG	301			CK-MB	53,00		82553
11/06/05		301			TROPONIN I	45.00		84484
11/06/05	CHG	301	8377150	1.00	BLOOD GAS ANALYSIS	89.00		82803
11/06/05	CHG	305	8285023	1.00	HEMOGRAM -III	35.00		85025
11/06/05	CHG	301	8282553	1.00	CK-MB	53.00		82553
11/06/05	CHG	301	82446770	1.00	TROPONIN I	46.00		84484
11/06/05	CHG	301		1.00	CK-MB TROPONIN I POTASSIUM K SERUM	20.00		84132
11/06/05	CHG	270	8375024	17.00	02 *VENIPUNCTURE CHARGE ICU-ROOM	119.00		•
11/07/05	11/06/05 CHG	300	8243503	1.00	*VENIPUNCTURE CHARGE	6.00		36415
11/06/05	CHG	200			ICU-ROOM	750.00		
11/07/05	CHG	730	8860058	1,00	EKG	72.50		93005
11/07/05	CHG	301	8280054	1.00	COMPREHENSIVE METABOLIC PANEL	49.00		80053
11/07/05	CHG	301	82446770	1.00	TROPONIN I	46.00	•	84484
11/07/05	CHG	301		1.00		53.00		82553
11/07/05	CHG	305	8285023	1.00	HEMOGRAM -III	35.00		85025
11/07/05	CHG	301	8244196	1.00	LIPID PANEL	51.00		80061
11/07/05	CHG	361	8379313	1.00	HEMOGRAM -III LIPID PANEL BLOOD GAS PUNCTURE	100.00		36600
11/07/05	CHG	270	8379255	1.00	BLOOD GAS KIT	10.25		
11/06/05	CHG	250	7929318		TETANUS/DIF ADULT	21.83		90718
11/06/05	CHG	250	7924640	1.00	ROCEPHIN (CEFTRIAXONE): 1 GM VIAL	177.01		J0696
11/06/05	CHG	250	7938807	1.00	DIPRIVAN VIAL 10 MG/ML 50 ML VIAL	101.25		
11/06/05	CHG	250	7921505		MORPHINE : 10 MG CJ	15.15		J2270
11/06/05	CHG	250	7938807	1.00	DIPRIVAN VIAL 10 MG/ML 50 ML VIAL	101.25		
11/06/05	CHG	250	7927353		MORPHINE 1MG/ML PCA	55.44		J2271
11/06/05	CHG	250	7924640	1.00	ROCEPHIN (CEFTRIAXONE): 1 GM VIAL	177.01		J0696
11/06/05	CHG	250	7938807	1.00 1	DIPRIVAN VIAL 10 MG/ML 50 ML VIAL	101.25		
11/06/05	CEG	250	7927270	1.00 1	LOPRESSOR (METOPROLOL); 5 MG AMP	19.05		
11/06/05	CKG	250	7938820	1.00 1	KCL 20.MEQ 100 ML MB	8.75		
11/06/05	CHG	250	7938607	1.00 1	DIPRIVAN VIAL 10 MG/ML 50 ML VIAL	101.25		
11/06/05	CHG	250	7938820	1.00 }	KCL 20 MEQ 100 ML MB	8.75		
11/06/05	CHG	250	7932708	1.00 E	PEPCID (FAMOTIDINE) INJ: 20MG/2ML S	12.81		
11/06/05	CHG	250	7939052	1.00 F	PREVACID IV (LANSOFRAZOLE): 30 MG V	68.73		
11/06/05	CHG	250	7938620	1.00 K	CL 20 MEQ 100 ML MB	8.75	1	
11/06/05	CHG	250	7938807	1.00 E	DIPRIVAN VIAL 10 MG/ML 50 ML VIAL	101.25		
11/06/05	CHG	250	7938820	1.00 K	CL 20 MEQ 100 ML MB	8.75		
11/06/05	CHG	250	7938807	1.00 E	DIPRIVAN VIAL 10 MG/ML 50 ML VIAL	101.25		
11/07/05	CHG	301	B377150	1.00 E	BLOOD GAS ANALYSIS	89.00		82803
11/07/05	CHG	250	7939052	1.00 P	REVACID IV (LANSOPRAZOLE): 30 MG V	68.73		
11/07/05	CHG	258	7931660	1.00 S	OD CHLORIDE 0.9%:50 ML	27.50		
<b>11/0</b> 7/05	CHG	250	7932475	8.00 D	IFRIVAN VIAL 10 MG/ML 50 ML VIAL	810.00		
11/07/05	CHG	250			IPRIVAN VIAL 10 MG/ML 50 ML VIAL		405.00	
11/07/05	CHG	324	8172231	1.00 €	HEST 1/VIEW	80.00		71010

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05/05/05 09:50 Monday Community Hospital

PATIENT ACCOUNT DETAIL 623236 GRIFFIN RONSHABUS

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COMMUNITY HOSPITAL 805 FRIENDSHIP ROAD

TALLASSEE

AL 36078-1225

PHONE: 334-283-6541 TAX ID#: 630047680

								Barrellion of the first	
A/R	SERV	TYPE		CHG/REC					MED
DATE	DATE		CODE		QTY	DESCRIPTION	CHARGE	CREDIT	NECESSARY CPT
11/07/05	·	CRG			2.00	TAMEN DESIGNATION AND ADDRESS OF THE PROPERTY			
11/07/05		CHG	258 250			LACTATED RINGERS: 1000 ML	69.16		J7120
11/07/05		CHG	258			PREVACID IV (LANSOPRAZOLE): 30 MG V			
11/07/05		CHG	250			SOD CHLORIDE 0.9%:50 ML	27.50		
11/07/05		CHG	258			ROCEPHIN (CEFTRIAXONE): 1 GM VIAL SOD CHLORIDE 0.9%:50 ML			J0696
11/07/05		CKG	250			FLAGYL (METRONIDAZOLE): 500 MG PB	27.50		
11/07/05		CHG	258			LACTATED RINGERS: 1000 ML	116.04	60.16	
11/07/05		CHG	258	8530032			69.16	69.16	J7120
11/07/05		4440	1120	20000		CRITICAL CARE	07.TO		J7120
11/07/05		CHG	960	1300201		CRITICAL CARE 1st HOUR	207.00		00001
11/07/05		CHG	250			DIPRIVAN VIAL 10 MG/ML 50 ML VIAL	397.00	4 A E A A	99291
11/07/05		CHG	250	7921513		ATIVAN (LORAZEPAM) INJ: 2 MG TUBEX	35.50	405.00	72060
11/07/05		CHG	352	8171837		CT CHEST W OMNIPAQUE	685,00		J2060 71260
11/07/05		CHG	324			CHEST 1/VIEW	80.00		71280 71010
11/07/05		CHG	324			CHEST 1/VIEW	80.00		71010
11/07/05		ĊĦG	270	8375024			168.00		71010
11/08/05			300			*VENIFUNCTURE CHARGE	6.00		36415
11/07/05	~~, ~ , , ~ •	CHG	200	0240000		ICU-ROOM	750.00		30413
11/08/05		41.0	200			+EKG W/FARAH	750.00		
11/08/05	11/07/05	CHG	985	8860525		+EKG W/FARAH INTERPRETATION	20.00		93010
11/08/05	,,	CHG	305	8285023		HEMOGRAM -III	35.00		85025
11/08/05		CHG	301	8243479		BASIC METABOLIC PANEL	38.00		80048
11/08/05		CHG	301	8282553	1.00		53.00		82553
11/08/05		CHG		82446770		TROPONIN I	46.00		B4484
11/08/05		CHG	324	8172231		CHEST 1/VIEW	80.00		71010
11/07/05		CHG	250	7924640		ROCEPHIN (CEFTRIAXONE): 1 GM VIAL			J0696
11/07/05		CHG	250	7927296		FLAGYL (METRONIDAZOLE): 500 MG PB			550,50
11/07/05		CHG	250	7927353		MORPHINE 1MG/ML PCA	55.44		J2271
11/08/05		CHG	270	8380255		AERO. T-ADAPT.	1.75		*****
11/08/05		CHG	270			DISPOSE TUBING (PROCEDURE)	10.25		
11/08/05		CHG	270			/ENT CIRCUIT	29.50		
11/08/05	11/06/05	CHG	258			SOD CHLORIDE 0.9%: 1000 ML	93.54		<i>5</i> 7030
11/08/05	11/06/05	CHG	258			SOD CHLORIDE 0.9%:50 ML	27.50		
11/08/05	11/06/05	CHG	250	7921448	7.00 %	WECTINE (SUCCINYLCHOLINE): 20 MG/M	41.30		J0330
11/08/05	11/06/05	CHG	250	7932476		DIPRIVAN VIAL 10 MG/ML 50 ML VIAL	40.50		
11/08/05	11/06/05	CHG	250	7921471	2.00 9	SUBLIMAZE (FENTANYL) 2 NL AMP	30.30		J3010
11/08/05	11/06/05	CHG	250	7921372	2.00 V	ERSED (MIDAZOLAM): 2 MG/2ML INJ	40.00		J2250
11/08/05	11/06/05	CHG	250	7926801	1.00 I	IDOCAINE 2% LOCAL	12.55		J2001
11/08/05	11/06/05	CHG	250	7938345	8.00 Z	EMURON (ROCURONIUM): 10 MG/ML 5 ML	87.20		
11/08/05		CHG	250	7927296 -	1.00 F	LAGYL (METRONIDAZOLE): 500 MG PB		29.51	
11/08/05		CHG	730	8860058	1.00 E	KG	72.50		93005
11/08/05		CHG	460	8380247	1.00 u	PDRAFT TREATMENT DAILY	25.25		94664
11/08/05		CHG	250	7939052	1.00 P	REVACID IV (LANSOPRAZOLE): 30 Mg V	68.73		,
11/08/05		CHG	258			OD CHLORIDE 0.9%:50 ML	27.50		
11/D8/05		CHG	250	7924640	1.00 R	OCEPHIN (CEFTRIAXONE): 1 GM VIAL	177.01		J0696
11/08/05		CHG	258			OD CHLORIDE 0.9%:50 ML	27.50		
11/08/05		CHG .	250	7927296	3.00 F.	LAGYL (METRONIDAZOLE): 500 MG PB	88.53		
11/08/05		CHG .	258	8530032	2.00 L	ACTATED RINGERS: 1000 ML	69.16		J7120
11/08/05		CHG :	258	B532384 .	1.00 S	OD CHLORIDE 0.9%: 100 ML	27.50		

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06/05/06 Community Hospital 09:50 Monday

PATIENT ACCOUNT DETAIL 623236 GRIFFIN RONSHABUS

PAGE 4 H5ARDET

COMMUNITY HOSPITAL 805 FRIENDSHIP ROAD

TALLASSEE AL 36078-1225

PHONE: 334-283-6541 TAX ID#: 630047680

							BEN	EFHSA	SEICHELL
A/R DATE	DATE		CODE	CHG/REC NUMBER	QTY	DESCRIPTION	CHARGE	CREDIT	MED NECESSARY CPT
11/08/05		CHG				CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1			
11/08/05		CHG				SPIROMETER DEVICE	39.75		
11/08/05		CHG				UPDRAFT NEB	19.75		
11/08/05		CHG	258			SOD CHLORIDE 0.9%: 100 ML		27.50	
11/08/05		CHG	250	7930944	-2.50	CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1		178.55	
11/08/05		CHG	460	8380248	1.00	***UPDRAFT TREATMENT SUBSEQUENTIAL	25.25	1,4133	
11/08/05		CHG	258			LACTATED RINGERS: 1000 ML	22.22	34.58	J7120
11/08/05		CHG	460	8380248	1.00	***UPDRAFT TREATMENT SUBSEQUENTIAL	25.25	34120	W/MDV
11/08/05		CHG	270	8375024	24.00	02	168.00		
11/09/05	11/08/05		300			*VENIPUNCTURE CHARGE	6.00		36415
L1/08/05	,	CHG	200				750.00		20413
11/09/05		CHG	306	8249039	1.00	CULTURE BLOOD	48 00		B7040
1/09/05		CHG	306	8249039	1.00	CULTURE BLOOD	48.00		87040
1/09/05		CHG	305	8285023	1.00	CULTURE BLOOD CULTURE BLOOD KEMOGRAM -III	35.00		85025
1/09/05		CHG	301	8290054	1 00	COMPREHENSIVE METABOLIC PANEL	40.00		80053
1/09/05		CHG	301	8244337					
1/09/05		CHG	460				32.00		83690
1/09/05		CHG	250	7027270	5.00	***UPDRAFT TREATMENT SUBSEQUENTIAL LOFRESSOR (METOPROLOL): 5 MG AMP	45.45		
1/09/05		CHG		7027270	-2.00	LOPELSON (METOPROLOL): 5 MG AMP	174.30	*** **	
1/09/05		CHG	258			LOPRESSOR (METOPROLOL): 5 MG AMP SOD CHLORIDE 0.9%: 100 ML	07.50	57.15	
1/09/05		CHG					27.50		
			250	7930344	4.50	CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1	178.55		
1/08/05		CHG		7927270	1.00	LOPRESSOR (METOPROLOL): 5 MG AMP	19.05		
1/08/05		CHG	250			MORPHINE 1MG/ML PCA	55.44		J2271
1/08/05		CHG	250			CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1			
1/08/05		CHG	250			CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5			
1/08/05		CHG	250			LOPRESSOR (METOPROLOL): 5 MG AMP	19.05		
1/08/05		CHG	250			MORPHINE 1MG/ML PCA	55.44		J2271
1/08/05		CHG	250			LOPRESSOR (METOPROLOL): 5 MG AMP			
1/09/05		CHG	460			***UPDRAFT TREATMENT SUBSEQUENTIAL			
1/09/05		CHG	250			TIMENTIN 3.1 GM VIAL	53.79		
1/09/05		CHG	258			SOD CHLORIDE 0.9%: 100 ML			
1/09/05			250			PIMENTIN 3.1 GM VIAL			
1/09/05			258			SOD CHLORIDE 0.9%: 100 ML			
1/09/05						SOD CHLORIDE 0.9%: 100 ML	55.00		
1/09/05						CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1	357.10		
L/09/05						PREVACID IV (LANSOPRAZOLE): 30 MG V	68.73		
1/09/05		CHG				GOD CHLORIDE 0.9%:50 ML	27.50		
1/09/05		CHG				LAGYL (METRONIDAZOLE): 500 MG PB	88.53		
L/ <b>0</b> 9/05		CHG	258	8530032	2.00 1	ACTATED RINGERS: 1000 ML	69.16		<b>σ7120</b>
L/09/05					I	DR FARAH IP 3			
./09/05	1	CHG	960	6099233	1.00 I	OR FARAH IP DAILY VISIT LEVEL 3	86.00		99233
/09/05					I	R FARAH IP 3			
/09/05 13	(/07/05	CHG	960	6099233	1.00 I	R FARAH IP DAILY VISIT LEVEL 3	86.00		99233
/09/05						R FARAH IP 2			
/09/05 11	1/08/05	CHG .	960	6099232	1.00 E	R FARAH IP DAILY VISIT LEVEL 2	61.00		99232
/09/05	(	CHG .				**UPDRAFT TREATMENT SUBSEQUENTIAL	25.25		F F F - 7
/09/05						RO FEE/ANES			
/00/05 11	./06/05 d	HG :	963	8795032 2		RO FEE/ANES MD MANRIQUE	1,495.00		
ADDADS TI									

04/26/2007 08:18 3342837444 NEPTUNE ACCT DEPT PAGE 09/20

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06/05/06 09:50 Monday

Community Hospital

PATIENT ACCOUNT DETAIL 623236 GRIFFIN RONSHABUS

PAGE 5 **H5ARDET** 

COMMUNITY HOSPITAL 805 FRIENDSHIP ROAD

TALLASSEE AL 36078-1225

PHONE: 334-283-6541 TAX ID#: 630047680

1.1/69/95   1.1/66/95 CRR   289   5350022   1.00   LACTMETED KINNERS: 1.000 ML   24.58   77120	A/R	SERV	TYPE		CHG/RE	:				MED
11/09/05 11/06/05 CND 258 8530037 2.00 SOD CHICATES 0.59: 1000 NL							Y DESCRIPTION	CHARGE		NECESSARY CPT
11/09/05 11/06/05 CM2 25 855057 2.06 SOC ELOCATED C.99: 100 GM1 62.55 7/030 11/09/05 11/06/05 CM2 270 855045 1.00 DARK HOUSEN ELONET										
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	258	8530057	2.0	SOD CHLORIDE 0.9%: 1000 ML	62.36		
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	270	8090944	1.0	) BAIR HUGGER BLANKET	49.00		
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	270	8536666	1.00	CATHLON 16	7.40		
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	270	8795007	1.00	) DISP BREATHING CIRC	25.00		
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	270	6090945	1.00	DISP MASK	12.00		
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	270	8534620	1.00	ENDO TUBE 8.5 FR	17.00		
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	270	8795262	1.00	ESOPHAGEAL STETOSCOP	14.25		
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	270	8532079	1.00	ORAL AIRWAYS	3.75		
11/09/05 11/06/05 CHG			CHG	270	8535973	1.00	SALEM SUMP 18FR	9.25		
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	270	8539728	1.00	SUCT YANKAUER INST	8.50		
11/09/05 11/06/05 CHG	11/09/05	11/06/05	CHG	270	7932061	1.00	HEPLOCK CATHETER	12.20		
11/09/05 11/06/05 CHG	11/09/05	11/06/05 (	CHG	270	8091514	1.00	ASEPTO SYRINGE, DISP.	6,25		
11/09/05 11/06/05 CHG	11/09/05	11/06/05 0	CHG	270	8091399	1.00	CAUTERY FENCIL, DISP	28.00		
11/09/05 11/06/05 CHG			CHG	270	8534490	1.00	DRAIN JACKSON / FRATT	31.00		
11/09/05 11/06/05 CHG	11/09/05	11/06/05 (	CHG	270	8099091	1.00	EXTENDED BLADE ELECTRODE	5.00		
11/09/05 11/06/05 CHG			HG	270	8533250	1.00	HEMOVAC MINI	35.00		
11/09/05 11/06/05 CHG	11/09/05	11/06/05 C	HG	270	8090698	2.00	DISP LAP SPONGES	44.00		
11/09/05 11/06/05 CHG			HG	270	8530362	2,00	PREP TRAYS	14.00		
11/09/05 11/06/05 CHG	11/09/05	11/06/05 C	HG	270	8090417	1.00	RAY-TEC SPONGES	5.75		
11/09/05 11/06/05 CHG	11/09/05	11/06/05 C	HG	270	8091241	1.00	SUCTION TUBING STERILE	17.25		
11/09/05 11/06/05 CHG	11/09/05	11/06/05 C	HG	270	8539728	1.00	SUCT YANKAUER INST	8.50		
11/09/05 11/06/05 CHG	11/09/05	11/06/05 C	HG	270	8090664	1,00	LAP FACK DISP.	65.00		•
11/09/05	11/09/05	11/06/05 C	HG	258	8530057	2.00				J7030
11/09/05	11/09/05	11/06/05 C					OPERATING ROOM	4,900.00		
11/09/05 CHG 270 8375024 24.00 O2 168.00  11/10/05 11/09/05 CHG 300 8243503 1.00 *VENIPUNCTURE CHARGE 6.00 36415  11/09/05 CHG 200 ICU_ROOM 750.00  11/10/05 11/08/05 CHG 985 8860525 1.00 **EKG W/FARAH  11/10/05 11/08/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 85025  11/10/05 CHG 305 8285023 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05				270			SUTURE 2880G	33.00		
11/09/05 CHG 270 8375024 24.00 O2 168.00  11/10/05 11/09/05 CHG 300 8243503 1.00 *VENIPUNCTURE CHARGE 6.00 36415  11/09/05 CHG 200 ICU_ROOM 750.00  11/10/05 11/08/05 CHG 985 8860525 1.00 **EKG W/FARAH  11/10/05 11/08/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 85025  11/10/05 CHG 305 8285023 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05				270			SUTURE 8425H	8.50		
11/09/05 CHG 270 8375024 24.00 O2 168.00  11/10/05 11/09/05 CHG 300 8243503 1.00 *VENIPUNCTURE CHARGE 6.00 36415  11/09/05 CHG 200 ICU_ROOM 750.00  11/10/05 11/08/05 CHG 985 8860525 1.00 **EKG W/FARAH  11/10/05 11/08/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 85025  11/10/05 CHG 305 8285023 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05							SUTURE CO17T	30.50		
11/09/05 CHG 270 8375024 24.00 O2 168.00  11/10/05 11/09/05 CHG 300 8243503 1.00 *VENIPUNCTURE CHARGE 6.00 36415  11/09/05 CHG 200 ICU_ROOM 750.00  11/10/05 11/08/05 CHG 985 8860525 1.00 **EKG W/FARAH  11/10/05 11/08/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 85025  11/10/05 CHG 305 8285023 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05							SUTURE K832H	5.00		
11/09/05 CHG 270 8375024 24.00 O2 168.00  11/10/05 11/09/05 CHG 300 8243503 1.00 *VENIPUNCTURE CHARGE 6.00 36415  11/09/05 CHG 200 ICU_ROOM 750.00  11/10/05 11/08/05 CHG 985 8860525 1.00 **EKG W/FARAH  11/10/05 11/08/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 85025  11/10/05 CHG 305 8285023 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05							SUTURE J946H	7.20		
11/09/05 CHG 270 8375024 24.00 O2 168.00  11/10/05 11/09/05 CHG 300 8243503 1.00 *VENIPUNCTURE CHARGE 6.00 36415  11/09/05 CHG 200 ICU_ROOM 750.00  11/10/05 11/08/05 CHG 985 8860525 1.00 **EKG W/FARAH  11/10/05 11/08/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 85025  11/10/05 CHG 305 8285023 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05							SUTURE J417H	8.00		
11/09/05 CHG 270 8375024 24.00 O2 168.00  11/10/05 11/09/05 CHG 300 8243503 1.00 *VENIPUNCTURE CHARGE 6.00 36415  11/09/05 CHG 200 ICU_ROOM 750.00  11/10/05 11/08/05 CHG 985 8860525 1.00 **EKG W/FARAH  11/10/05 11/08/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 85025  11/10/05 CHG 305 8285023 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 NG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05							SKIN STAPLES	38.75		
11/10/05 11/09/05 CHG 300 8243503 1.00 *VENIPUNCTURE CHARGE 6.00 750.00  11/10/05 CHG 200 TCU-ROOM 750.00  11/10/05 CHG 200 TCU-ROOM 750.00  11/10/05 11/08/05 CHG 985 8860525 1.00 *EKG W/FARAH INTERPRETATION 20.00 93010  11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 305 8285023 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 258 8530032 -1.00 LACTATED RINGERS: 1000 ML 34.58 J7120  11/09/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927353 1.00 MORPHINE 1MG/ML FCA 55.44 J2271  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84  11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10							OPDRAFT TREATMENT HUBSEQUENTIAL	25.25		
11/09/05 CHG 200 ICU-ROOM 750.00  11/10/05 11/08/05 CHG 985 8860525 1.00 +EKG W/FARAH INTERPRETATION 20.00 93010  11/10/05 11/08/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 305 8285023 1.00 HEMOGRAM -III 35.00 85025  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 258 8530032 -1.00 LACTATED RINGERS: 1000 ML 34.58 J7120  11/09/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84  11/09/05 CHG 250 793325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10								168.00		
11/10/05					8243503					36415
11/10/05 11/08/05 CHG 985 8860525 1.00 +EKG W/FARAH INTERPRETATION 20.00 93010 11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048 11/10/05 CHG 305 8285023 1.00 HEMOGRAM -III 35.00 85025 11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25 11/10/05 CHG 258 8530032 -1.00 LACTATED RINGERS: 1000 ML 34.58 J7120 11/09/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00 11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05 11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05 11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05 11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOFROLOL): 5 MG AMP 19.05 11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84 11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10		C)	HG 2	300				750.00		
11/10/05 CHG 301 8243479 1.00 BASIC METABOLIC PANEL 38.00 80048  11/10/05 CHG 305 8285023 1.00 HEMOGRAM -III 35.00 85025  11/10/05 CHG 460 8380248 1.00 ****UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 258 8530032 -1.00 LACTATED RINGERS: 1000 ML 34.58 J7120  11/09/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 55.44 J2271  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84  11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10										•
11/10/05 CHG 305 8285023 1.00 HEMOGRAM -III 35.00 85025  11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 258 8530032 -1.00 LACTATED RINGERS: 1000 ML 34.58 J7120  11/09/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 55.44 J2271  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84  11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10										
11/10/05 CHG 460 8380248 1.00 ***UPDRAFT TREATMENT SUBSEQUENTIAL 25.25  11/10/05 CHG 258 8530032 -1.00 LACTATED RINGERS: 1000 ML 34.58 J7120  11/09/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927353 1.00 MORPHINE 1MG/ML PCA 55.44 J2271  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84  11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10										
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11/09/05 CHG 250 7921315 1.00 TYLENOL (ACETAMINOPHEN) SUPP: 650 M 3.00  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7927353 1.00 MORPHINE 1MG/ML PCA 55.44 J2271  11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05  11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84  11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10								25.25		
11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOPROLOL): 5 MG AMP 19.05 11/09/05 CHG 250 7927353 1.00 MORPHINE 1MG/ML PCA 55.44 J2271 11/09/05 CHG 250 7927270 1.00 LOFRESSOR (METOPROLOL): 5 MG AMP 19.05 11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84 11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10									34.58	J7120
11/09/05 CHG 250 7927353 1.00 MORPHINE 1MG/ML PCA 55.44 J2271 11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05 11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84 11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10										
11/09/05 CHG 250 7927270 1.00 LOPRESSOR (METOPROLOL): 5 MG AMP 19.05 11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84 11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10										
11/09/05 CHG 250 7930944 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1 142.84 11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10										J2271
11/09/05 CHG 250 7932325 2.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 77.10										
.,										
17/109/05 CNG 250 7922275 1 00 635577588 /557mms.chart										
11/09/05 CHG 250 7932325 1.00 CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5 38.55	11/09/05	CH	IG 2	50 '	7932325	1.00 (	CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 5	38.55		

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Community Hospital

PATIENT ACCOUNT DETAIL 623236 GRIFFIN RONSHABUS

PAGE 6 **H5ARDET** 

COMMUNITY HOSPITAL 805 FRIENDSHIP ROAD

TALLASSEE

AL 36078-1225

PHONE: 334-263-6541 TAX ID#: 630047680

							-		-7 President Constitution (Constitution
A/R	SERV	TXPE		CHG/RE	C				MED
DATE	DATE			NUMBE	R QT	( DESCRIPTION	CHARGE	CREDIT	NECESSARY CPT
11/09/05	;	CHG			3 1.00	MORPHINE 1MG/ML PCA	55.44		 д2271
11/09/09	5	CHG				TYLENOL (ACETAMINOPHEN) SUPP: 650 M			5 A A 7 E
11/10/09	5	CHG	307			URINALYSIS WITH MICRO			81001
11/10/05	i	CHG	460	8380248	3 1.00	***UPDRAFT TREATMENT SUBSEQUENTIAL	25.25	•	
11/10/05	i	CHG	324		1.00	CHEST 2/VIEW	115.00		71020
11/10/05	;	CHG	320	8170258	1.00	CHEST 2/VIEW ABDOMEN FLAT & ERECT	182.00		74022
11/10/05	;	CHG	250	7939052	1.00	PREVACID IV (LANSOPRAZOLE): 30 MG V	68.73		,
11/10/05		CHG	258			SOD CHLORIDE 0.9%:50 ML			
11/10/05		CHG	250	7927296	3.00	FLAGYL (METRONIDAZOLE): 500 MG PB	88.53		
11/10/05		CHG	258	8530032	2.00	LACTATED RINGERS: 1000 ML	69.16		J7120
11/10/05		CHG	250			TIMENTIN 3.1 GM VIAL			
11/10/05		CHG	258	8532364	4.00	SOD CHLORIDE 0.9%: 100 ML	110.00		
11/10/05		CHG	258	8532384	3.00	SOD CHLORIDE 0.9%: 100 ML	82.50		
11/10/05		CHG	250	7930944	7.50	CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1	535.65		
11/10/05		CHG	258	8532384	-1.00	SOD CHLORIDE 0.9%: 100 ML		27.50	
11/10/05		CHG	250	7930944	-2.50	SOD CHLORIDE 0.9%: 100 ML CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1		178.55	
11/10/05		CHG	250	7927270	16.00	LOPRESSOR (METOPROLOL): 5 MG AMP	304.80		
11/10/05		CHG	460	8380248	1.00	***UPDRAFT TREATMENT SUBSEQUENTIAL	25.25		
11/10/05		CHG	460	8380248	1.00	***UPDRAFT TREATMENT SUBSEQUENTIAL	25.25		
11/10/05		CHG	270	8375024	24.00	02	168.00		
11/11/05	11/10/05	CHG	300	8243503	1.00	02 *VENIPUNCTURE CHARGE	6.00		36415
11/10/05		CHG	200			ICU-ROOM	750.00		
11/11/05		CHG	301	8243479	1.00	BASIC METABOLIC PANEL	38.00		80048
11/11/05		CHC		6285023	1.00	HEMOGRAM -III	35.00		85025
11/11/05		CHG	460	8380248	1.00	***UPDRAFT TREATMENT SUBSEQUENTIAL	25.25		
11/10/05		CHG	250	7927353	1.00	MORPHINE 1MG/ML PCA LOPRESSOR (METOPROLOL): 5 MG AMP	55,44		J2271
11/10/05		CHG	250	7927270	1.00	LOPRESSOR (METOPROLOL): 5 MG AMP	19.05		
11/10/05		CHG	250	7927270	1.00	LOPRESSOR (METOPROLOL): 5 MG AMP MORPHINE 1MG/ML PCA MOTRIN (IBUPROFEN): 400 MG TAB	19.05 55.44		
11/10/05		CHG	250	7927353	1.00	MORPHINE 1MG/ML PCA	55.44		J2271
11/11/05		CHG	250	7921117	4.00	MOTRIN (IBUPROFEN): 400 MG TAB	7.20		
11/11/05		CHG	250	7921299	7.00	LOPRESSOR (METOPROLOL): 50 MG TAB	12.60		
11/11/05		CHG	250	7932258	1.00	PNEUMOVAK 23 VACCINE	49.63		
11/11/05		CHG	250	7932258	-1.00	PNEUMOVAK 23 VACCINE		49.63	
11/11/05		CHG	460	8380248	1.00	PNEUMOVAK 23 VACCINE ***UPDRAFT TREATMENT SUBSEQUENTIAL	25.25		
11/11/05		CHG	250	7927270	-4.00	LOPRESSOR (METOPROLOL): 5 MG AMP		76.20	
11/11/05					;	DR FARAH IP 3			
11/11/05	11/10/05	CHG	960	6099233	1,00	DR FARAH IP DAILY VISIT LEVEL 3	86.00		99233
11/11/05		CHG	324	8171381	1.00	CHEST W LAT DECUB.	170.00		71035
11/11/05		CHG	250	7931306	4.00	CARDIZEM CD: 240 MG	25.68		
11/11/05		ĊHĢ	250	7939052	1.00 1	PREVACID IV (LANSOPRAZOLE): 30 Mg V	68.73		
11/11/05		CHG	258	7931660	1.00 \$	SOD CHLORIDE 0.9%:50 ML	27.50		
11/11/05		CHG	250	7927296	3.00	FLAGYL (METRONIDAZOLE): 500 MG PB	88.53		
11/11/05		ĊHG	250	7939139		FIMENTIN 3.1 GM VIAL	215.16		
11/11/05		CHG	258	8532384	4.00 5	SOD CHLORIDE 0.9%: 100 ML	110.00		
11/11/05		CHG	480	8171589		IS CARDIAC DOPPLER	322.00		93320
11/11/05		CHG		8172561		S DOPPLER COLOR FLOW MAPPING	600.00		93325
11/11/05	1	CHG				S ECHO 2D W/O COLOR FLOW	570.00		93307
11/11/05	1	CHG	250	7927296	-2.00 F	LAGYL (METRONIDAZOLE): 500 MG PB		59.02	
11/11/05	•	CHG	258	8530032 -	-1.00 I	ACTATED RINGERS: 1000 ML		34.58	J7120

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PATIENT ACCOUNT DETAIL 623236 GRIFFIN RONSHABUS

**H5ARDET** 

COMMUNITY HOSPITAL 805 FRIENDSHIP ROAD

TALLASSEE

AL 36078-1225

PHONE: 334-283-6541 TAX ID#: 630047680

a/r date	SERV DATE	TYPE	CODE	CHG/REC		DESCRIPTION	G171 7 GP		MED
						DESCRIPTION	CHARGE	CREDIT	NECESSARY CPT
11/11/05		CHG	258	8530032	-1.00	LACTATED RINGERS: 1000 ML		34.58	J7120
11/11/05		CHG	450	8380248	1.00	***UPDRAFT TREATMENT SUBSEQUENTIAL	25.25		7/281
11/11/05		CHG	460			***UPDRAFT TREATMENT SUBSEQUENTIAL			
11/11/05		CHG	402				345.00		76880
11/11/05		CHG	270	8375024			126.00		
11/12/05	11/11/05	CHG	300	8243503	1.00	*VENIPUNCTURE CHARGE	6.00		36415
11/12/05		CHG	250	7939139	-3.00	TIMENTIN 3.1 GM VIAL SOD CHLORIDE 0.9%: 100 ML FLAGYL (METRONIDAZOLE): 500 MG PB		161,37	
11/12/05		CHG	258	8532384	-3.00	SOD CHLORIDE 0.9%: 100 ML		82.50	
11/12/05		CHG	250	7927296	-3.00	FLAGYL (METRONIDAZOLE): 500 MG PB		88.53	
11/12/05		CHG	250	7939052	-1.00	PREVACID IV (LANSOPRAZOLE): 30 MG V		68.73	
11/12/05		CHG	258	7931660	-1.00	SOD CHLORIDE 0.9%:50 ML		27.50	
11/11/05		CHG	250	7927270	1.00	LOPRESSOR (METOPROLOL): 5 MG AMP	19.05		
11/11/05		CHG	250	7927296	1.00	FLAGYL (METRONIDAZOLE): 500 MG PB	29.51		
11/11/05		CHG	250	7927353	1.00	MORPHINE 1MG/ML PCA	55.44		J2271
11/11/05		CHG	250	7921299	1.00	LOPRESSOR (METOPROLOL): 50 MG TAB	1.80		
11/11/05		CHG	250	7930456	2.00	K DUR (POTASSIUM CHL): 20 MEQ TAB	3.60		
11/12/05		CHG		7931306	1.00	CARDIZEM CD: 240 MG	6.42		
11/13/05		CHG	250	7927270	-6.00	LOPRESSOR (METOPROLOL): 5 MG AMP LOPRESSOR (METOPROLOL): 5 MG AMP MOTRIN (IBUPROFEN): 400 MG TAB SOD CHLORIDE 0.9%: 100 ML CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1		114.30	
11/13/05		CHG	250	7927270	-1.00	LOFRESSOR (METOPROLOL): 5 MG AMP		19.05	
11/13/05		CHG	250	7921117	-3,00	MOTRIN (IBUPROFEN): 400 MG TAB		5,40	
11/13/05		CHG	258	8532384	-1,00	SOD CHLORIDE 0.9%: 100 ML		27.50	
11/13/05		CHG	250	7930944	-2.50	CARDIZEM (DILTIAZEM) 5 MG/ML INJ: 1		178.55	
11/16/05						DR FARAH IP 3			
11/16/05	11/11/05	CHG	960	6099233	1.00	DR FARAH IP DAILY VISIT LEVEL 3	86.00		99233
12/02/05		PAY	ľMAD	250318		B BLUE CROSS IP		26,195.96	
12/05/05		PAY :	INVD	250573		BP BLUE CROSS PHYSICIAN		14.00	
12/05/05		PAY :	INVD	250573		BP BLUE CROSS PHYSICIAN BP BLUE CROSS PHYSICIAN BP BLUE CROSS PHYSICIAN		96.60	
12/05/05		PAY :	INVD	250575	:	BP BLUE CROSS PHYSICIAN		377.00	
03/22/06						FECHO JOHNSON			
03/22/06	11/06/05	CHG	972	8660467	1.00	ECHO JOHNSON INTERPRETATION	175.00		9335026
03/22/06						FECHO JOHNSON			
03/22/06 0	11/11/05	CHG	972	B860467	1.00 -	ECHO JOHNSON INTERPRETATION	175.00		9335026
04/12/06	:	PAY 1	INVD	258039	2	BP BLUE CROSS PHYSICIAN		1,495.00	

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06/05/06 Community Hospital
09:50 Monday PATIENT ACCOUNT DE

PATIENT ACCOUNT DETAIL 623236 GRIFFIN RONSHABUS

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COMMUNITY HOSPITAL 805 FRIENDSHIP ROAD

TALLASSEE

AL 36078-1225

PHONE: 334-283-6541 TAX ID#: 630047680

	T CHARGE SUMMARY ****	*****			
REVENU				DAYS MED-	
CODE	DESCRIPTION	AMOUNT	DAYS	NECESSARY	UNITS
200	ROOM CHG-ICU CARE	3,750.00	5		5.00
361	OR/MINOR	100.00	,		1.00
360	OPERATING ROOM	4,900.00			1.00
3 02	LAB/IMMUNOLOGY	675.00			
270	CENTRAL SUPPLIES	1,681.55			5.00
450	EMERGENCY ROOM	702.00			171.00 4.00
258	IV SOLUTIONS	1,092.82			37.00
3 0 5	LAB/HEMOTOLOGY	280.00			8.00
300	LABORATORY	103.00			7.00
301	LAB/CHEMISTRY	1,303.00			25.00
306	LAB/RACTERIOLOGY & MICROBIOLOG				2.00
391	BLOOD ADMINISTRATION	86.75			1.00
307	LAB/UROLOGY	15.00			1.00
730	CARDIOLOGY-EKG/ECG	290.00			4.00
480	ULTRASOUND-CARDIOLOGY	2,984.00			6.00
390	BLOOD/PACKED RED CELLS	350.00			1.00
402	ULTRASOUND	345.00			1.00
320	RADIOLOGY	382.00			3.00
. 250	PHARMACY	5,476.59			134.40
324	CHEST X-RAY	845.00			9.00
370	ANESTHESIA	840.00			1.00
460	PULMONARY FUNCTION	513.25			16.00
972	PROF FEE RADIOLOGY - DIAGNOSTI	350.00			2.00
352	CT SCAN/BODY	685.00			1.00
985	PROF FEE EKG	40.00			2.00
960	PROF FEES-E/R DR	397.00			1.00
963	PRO FE/ANES MD	1,495.00			23.00
960	PROFESSIONAL FEES	405.00			5.00
	TOTAL CHARGES	30,182.96			
	TOTAL ADJUSTMENTS	0,00			
	LESS PAYMENTS	28,178.56			
	AR BALANCE	2,004.40			

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Itemized Statement

Page 2 06/02/2006

Jackson Hospital & Clinic, Inc. 1725 Pine Street Montgomery, AL 36106-1117

Guarantor:

GRIFFIN, RONSHABUS 110 WALLAHATCHEE

Service Charge

Patient:

GRIFFIN, RONSHABUS ACCT #: 10759196 Admit Date: 11/11/05 Discharge Date: 11/19/05 TALLASSEE, AL 36078 Attending Physician: MESINA, CHRISTOPHER P.

Charg	ടെ വ	₽Ţ	al.	7
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Service	chards			
Date	Ccde	Qnt.	Description	Amount
11/12/05		.1.	MORPHINE INJ 4MG/1ML UD	17.00
	4120364	1	MORPHINE INJ 4MG/1ML UD	17.00
11/12/05	4120364	1	MORPHINE INJ 4MG/1ML UD	17.00
11/12/05	4167006	1	DEXTROSE 5% WATER 100ML	30.00
1 <b>1</b> /12/05	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/12/05	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/12/05	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/12/05	4167007	1	DEXTROSE 5% WATER 50ML	29.00
11/12/05	4167007	1	DEXTROSE 5% WATER 50ML	29.00
11/12/05	4167007	1	DEXTROSE 5% WATER 50ML	29.00
11/12/05	4123007	1	POVIDONE IOD SOLN 120ML	47.00
11/12/C5	4580001	1	ABO	30.00
11/12/05	4580002	1	RH	30.00
11/12/05	4580003	1	ANTIBODY SCREEN	25.00
11/12/05	4580004	1	ANTIBODY IDENTIFICATION	195.00
11/12/C5	4592101	l	ANTIGEN INFO	50.00
11/12/05	4592102	1	AG/AB INFO (ON UNITS)	53.00
11/12/05	4592102	1	AG/AB INFO (ON UNITS)	50.00
11/12/05	4580008	1	CROSSMATCH RESULT	50.00
11/12/05	4580008	1	CROSSMATCH RESULT	53.00
11/12/C5	4360012	1.	BASIC METABOLIC PANEL	45.00
11/12/05	4361413	1	LIVER PROFILE	40.00
11/12/05	4390010	I	CBCA	35.00
11/12/05	4300613	1	CHEST 1 VIEW	145.00
11/12/05.	4300613	1	CHEST 1 VIEW	145.00
11/12/C5	4710010	1	ROUTINE EKG	150.00
<b>11</b> /12/05	4710011	1	ROUTINE EKG FROFESSIONAL	30.00
11/12/05	4186114		MEDICAL SUPPLY SICU	685.00
11/12/05	4185024	1	STOCKING, SEQ COMP KENDAL	289.00
11/12/C5	4180602		PLEUR-EVAC CHEST DRAIN	105.00
11/12/C5	4180602	1	PLEUR-EVAC CHEST DRAIN	105.00
<b>11</b> /12/05		Se;	rvice Date Total:	5116.00
11/13/05	3500030	1 0	CRITICAL CARE	1445.00
11/13/05	4125245	1 1	FAMOTIDINE TAB 20MG UD	16.00
11/13/05	4125245		FAMOTIDINE TAB 20MG UD	16.00
11/13/05	4124346		NOXAFARIN INJ. 40MG	128.00
11/13/C5	4128733		OSYN INJ 3.37GM	110.00
11/13/05	4128733		OSYN INJ 3.37GM	113.00
11/13/05	4128733		OSYN INJ 3.37GM	113.00

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Jackson Hospital & Clinic, Inc. 1725 Pine Street Montgomery, AL 36106-1117

Guarantor: Patient:

GRIFFIN, RONSHABUS 110 WALLAHATCHEE TALLASSEE, AL 36078

Service Charge

GRIFFIN, RONSHABUS ACCT #: 10759196 Admit Date: 11/11/05 Discharge Date: 11/19/05 Attending Physician: MESINA, CHRISTOPHER P.

Charge	Decail
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METATOE	charde			
Date	Ccde	Qnt.	Description	Amount
	4128733	1	ZOSYN INJ 3.37GM	113.00
11/13/05	4128553	,1	DILTIAZEM CO CAP 240MG UD	21.00
11/13/C5	4121299	1	METOPROLOL TAB 50MG UD	6.00
11/13/05	4121299	1	METOPROLOL TAB 50MG UD	6.00
11/13/05	4120008	1	ACETAMINOPHEN TAB 650MG	0.00
11/13/05	4127253	2	CEFAZCLIN INJ PER 500MG	100.00
11/13/C5	4127253	2	CEFAZOLIN INJ PER 500MG	100.00
11/13/C5	4127253	2	CEFAZOLIN INJ PER 500MG	100.00
11/13/05	4120364	1	MORPHINE INJ 4MG/1ML UD	17.00
11/13/05	4120364	1	MORPHINE INJ 4MG/1ML UD	17.00
11/13/C5	4120364	1	MORPHINE INJ 4MG/1ML UD	17.00
11/13/C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/13/C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/13/C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/13/C5	4167006	1	DEXTROSE 5% WATER 100ML	33.00
11/13/05	4167007	ı	DEXTROSE 5% WATER 50ML	29.00
11/13/C5	4167007	1	DEXTROSE 5% WATER 50ML	29.00
11/13/C5	4167007	1	DEXTROSE 5% WATER 50ML	29.00
11/13/05	4360001	1	COMP METABOLIC PANEL	50.00
11/13/C5	4390010	1	CBCA	35.00
11/13/05	4390026	1	PROTHROMBINE TIME	30.00
11/13/C5	4390554		PTT	30.00
11/13/05	4300613	1	CHEST 1 VIEW	145.00
11/13/05	4186114	J	MEDICAL SUPPLY SICU	685.00
11/13/05		\$€	rvice Date Total:	3611.00
11/14/05	3120002	1	6 TOWER PRIVATE	865.00
11/14/C5	4125245		FAMOTIDINE TAB 20MG UD	16.00
11/14/05	4125245	1	FAMOTIDINE TAB ZOMG UD	16.00
	4124346		ENOXAFARIN INJ. 40MG	128.00
11/14/C5	4128733		ZOSYN INJ 3.37GM	110.00
11/14/05	· • • • • • • • • • • • • • • • • • • •		ZOSYN INJ 3.37GM	110.00
11/14/C5	4128733		ZOSYN INJ 3.37GM	113.00
	4128553		DILTIAZEM CD CAP 240MG UD	21.00
11/14/05	4121299		METOPROLOL TAB 50MG UD	୍ ଶ.୦୦
	4121299		METOPROLOL TAB 50MG UD	6.00
	4132578		ENSURE PLUS IIQ 240ML	17.00
11/14/C5	4132578		ENSURE PLUS IIQ 240ML	17.00
11/14/C5	4132578		ENSURE PLUS LIQ 240ML	17.00
11/ <b>1</b> 4/05	4127253	2	CEFAZOLIN INJ PER 500MG	100.00

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Jackson Hospital & Clinic, Inc. 1725 Pine Street Montgomery, AL 36106-1117

Guarantor:

GRIFFIN, RONSHABUS 110 WALLAHATCHEE TALLASSEE, AL 36078 Patient:

GRIFFIN, RONSHABUS ACCT #: 10759196 Admit Date: 11/11/05 Discharge Date: 11/19/05 Attending Physician: MESINA, CHRISTOPHER P.

			Observe Bahada	
Service	Charge		Charge Detail	•
Date	Code	Qnt.	Description	Amount
11/14/C5	4124366	1	VANCOMYCIN INJ 1GM	64.00
11/14/C5	4124366	î	VANCOMYCIN INJ 1GM	64.00
11/14/05	4124366	1.	VANCOMYCIN INJ 1GM	64.00
11/14/05	41.67006	1	DEXTROSE 5% WATER 100ML	30.00
11/14/C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/14/C5	4167006	ī	DEXTROSE 5% WATER 100ML	30.00
11/14/05	4167007	1	DEXTROSE 5% WATER 50ML	29.00
11/14/C5	4167003	1	DEXTROSE 5% WATER 250ML	33.00
11/14/C5	4167003	Ţ	DEXTROSE 5% WATER 250ML	33.00
11/14/05	4167003	1	DEXTROSE 5% WATER 250ML	33.00
11/14/C5	4390010	1	CBCA	35.00
11/14/C5	4300613	1	CHEST 1 VIEW	145.00
11/14/C5	4620058	1	GAIT TRAINING 15 MIN X1	55.00
11/14/C5	4620021	1	PT-EVALUATION	81.00
11/14/C5	4186110	1	MEDICAL SUPPLY 6 WEST	236.00
11/14/05		S	Service Date Tctal:	2501.00
11/15/05	3120002	1	6 TOWER PRIVATE	865.00
11/15/05	4125245	1	FAMOTIDINE TAB 20MG UD	16.00
11/15/05	4125245	1	FAMOTIDINE TAB 20MG UD	16.00
11/15/C5	4124346	1	ENOXAFARIN INJ. 40MG	129.00
11/15/05	4128733	1	ZOSYN INJ 3.37GM	113.00
11/15/05	4128733	1	ZOSYN INJ 3.37GM	110.00
11/15/05	4128733	1	ZOSYN INJ 3.37GM	110.00
11/15/05	4128733	1	ZÖSYN INJ 3.37GM	113.00
11/15/C5	4128733	1	ZOSYN INJ 3.37GM	110.00
11/15/05	4128553	1	DILTIAZEM CD CAP 240MG UD	21.00
11/15/C5	4121299	1	METOPROLOL TAB 50MG UD	6.00
11/15/C5	4121299	1	METOPROLOL TAB 50MG UD	<b>6.</b> 00
11/15/C5	4132578	1	ENSURE PLUS 11Q 240ML	17.00
11/15/C5	4124366	1	VANCOMYCIN INJ 1GM	64.00
11/15/C5	4124366	1	VANCOMYCIN INJ 1GM	64.00
11/15/C5	4124366	1	VANCOMYCIN INJ 1GM	64.00
11/15/05	4167006	1	DEXTROSE 5% WATER 100ML	33.00
11/15/05	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/15/C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/15/C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/15/05	4167006	1.	DEXTROSE 5% WATER 100ML	30.00
11/15/05	4167003	1	DEXTROSE 5% WATER 250ML	33.00
11/15/05	4167003	1	DEXTROSE 5% WATER 250ML	33.00

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Jackson Hospital & Clinic, Inc. 1725 Pine Streat Montgomery, AL 36136-1117

Guarantor: Patient:

GRIFFIN, RONSHABUS 110 WALLAHATCHEE TALLASSEE, AL 36078

GRIFFIN, RONSHABUS ACCT #: 10759196 Admit Date: 11/11/05 Discharge Date: 11/19/05 Attending Physician: MESINA, CHRISTOPHER P.

### Charge Detail

			cudide perati	
Service	Charge			
Date	Code	⊉nt.	Description	Amount
11/15/C5	4167003	1	DEXTROSE 5% WATER 250ML	33.00
11/15/C5	4290536		CT-CHEST SINGLE W/CONTRAST	925.00
11/15/C5	4290511		CT ABDOMEN WITH CONTRAST	975.00
11/15/C <b>5</b>	4186110	1		236.00
11/15/05		5	Service Date Total:	4202.00
11/16/C5	3120002	1	6 TOWER PRIVATE	865.00
	4125245	1	FAMOTIDINE TAB 20MG UD	16.00
11/16/05		1.	ZOSYN INJ 3.37GM	113.00
11/16/C5	4128733	1	ZOSYN INJ 3.37GM	110.00
11/16/C5	4128553	1	DILTIAZEM CD CAP 240MG UD	21.00
11/16/C5	4121299	1	METOPROLOL TAB 50MG UD	<b>5.00</b>
11/16/C5		I	MORPHINE INJ 4MG/1ML UO	17.00
11/16/C5		1	VANCOMYCIN INJ 1GM	64.00
11/16/C5		1	VANCOMYCIN INJ 1GM	64.00
11/16/05	4127253		CEFAZOLIN INJ PER 500MC	100.00
11/16/05	4127149	1	METOCIOPRAMIDE TAB 10MG	7.00
11/16/05	4124354	2	MIDAZOLAM INJ PER 1MG	48.00
11/16/05	4121987	2	FENTANYL INJ 0.1MG/2ML	54.00
<b>11/16</b> /05	4124354		MIDAZOLAM INJ PER 1MG	43.00
11/16/C5	4127253		CEFAZOLIN INJ PER 500MG	100.00
11/16/05	4121400	1	MEPERIDINE INJ 50MG	17.00
11/16/05	4123324	1	ATRACURIUM INJ 10MG	45.00
11/16/C5	4121880	3	GLYCOFYRROLATE INJ 0.2MG	51.00
11/16/05	4121819	3	NEOSTIGMINE INJ 1MG/1ML	63.00
11/16/C5	4128060	<u>1</u>	PROPOFOL INJ 200MG/20ML	46.00
11/16/05	4120111	б	SUCCINYLCHOLINE INJ 20MG	102.00
11/16/05	4121471	1	MORPHINE INJ 10MG/ML UD	17.00
11/16/C5	4121677		PERCOCET TAB UD	16.00
11/16/05	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/16/C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/16/C5	4167003	1	DEXTROSE 5% WATER 250ML	33.00
11/16/05	4167003	1	DEXTROSE 5% WATER 250ML	33.00
11/16/C5	41€7007		DEXTROSE 5% WATER 50ML	29.00
11/16/C5	4167029		LACTATED RINGERS IJ 1000M	71.00
11/16/05	4180675		CATH THORACIC DEKNATEL	22.00
11/16/05	4154055		IV CATHETER 18G X 1-1/4"	19.00
11/16/C5	4157062	1	IV SET PRIM FB NV 96"	94.00
11/16/05	4152479		"CE TER NOIRNETKE	12.00
11/16/05	4152477	1	STOPCOC 3 WAY ET20" K52	26.00

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## Jackson Hospital & Clinic, Inc. 1725 Pine Streat Montgomery, AL 36136-1117

Guarantor:

GRIFFIN, RONSHABUS 110 WALLAHATCHEE TALLASSEE, AL 36078 Patient:

GRIFFIN, RONSHABUS ACCT #: 10759196 Admit Date: 11/11/05 Discharge Date: 11/19/05 Attending Physician: MESINA, CHRISTOPHER P.

Charge	Detail
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Service	Charge			
Date	Code	Qnt.	Description	Amount
11/16/05	4180596	l	SUTURE VICRYL II	22.00
1 <b>1</b> /16/05	4180596	1	SUTURE VICRYL II	22.00
11/16/05	4183272		BOVIE PAD	13.00
11/16/C5	4183403	2	TROCAR 12MM	544.00
	4184259		ANTIFOG	36.00
	4184403	1	PACK MAJOR CUSTOM	187.00
1 <b>1/1</b> 6/05	4185279	1	SUTURE VICRYL I	13.00
11/16/C5	4188719	1	SUTURE SILK I	15.00
11/16/05	4188782	1	SPONGE GZE TRIPAQUE 4X4	13.00
11/16/C5	4189207	1	CATH, THOR RIGHT ANGLE	76.00
11/16/05	4188795	7	ATDUAY DIOD	13.00
11/16/05	4182390	1	CIRCUIT, BREATHING DISP	45.00
	4186153	1	FILTER, PALL HME	33.00
	4180331		STETHESCOPE ESOP CATH 18F	37.00
1 <b>1</b> /16/05			TUBE ENDOBRO DISP 35 FR L	496.00
11/16/05	4189348		SUCTION TUBE YANKAUER	9,00
11/16/C5	4393309		GLUCOSE (METER)	35.00
11/16/C5 11/16/C5	4360012		BASIC METABOLIC PANEL	45.00
11/16/05	4390010	1.	CBCA	35.00
	4400963		URINE CULTURE	45.00
	4300613		CHEST 1 VIEW	145.00
	4004230			1645.00
<b>11</b> /16/C5			OPEN HEART SURGERY ADD 15 MIN	415.00
11/16/05		1	ANESTHESIA GASES	511.00
11/16/05			RECOVERY POST-OP 1 HOUR	705.00
11/16/05			RECOVERY POST-OP ADD 15M	720.00
11/16/C5			MEDICAL SUPPLY & WEST	236.00
11/16/05			PLEUR-EVAC CHEST DRAIN	105.00
11/16/C5		1	IRRIGATION NACL 1000ML	71.00
11/16/C5		2	PROTECTOR HEEL/ELBOW	50.00
11/16/05	4189141	1	SUCTION CANISTER	50.00
11/16/05	4183285	1	MASK, ANESTHESIA	35.00
11/16/05	4183303	1	HEAD REST, DO-NUT, DSP	24.00
11/16/05		5€	rvice Date Total:	8837.00
11/17/05	3120002	1	6 TOWER PRIVATE	865.00
11/17/05	4125245	1	FAMOTIDINE TAB 20MG UD	16.00
11/17/05	4125245	1	FAMOTIDINE TAB ZOMG UD	16.00
11/17/C5	4124346		ENOXAFARIN INJ. 40MG	123.00
11/1 <sup>7</sup> /05	4128733	1	ZOSYN INJ 3.37GM	110.00

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Itemized Statement

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Jackson Hospital & Clinic, Inc. 1725 Pine Street Montgomery, AL 36136-1117

Guarantor: Patient:

GRIFFIN, RONSHABUS 110 WALLAHATCHEE TALLASSEE, AL 36078 GRIFFIN, RONSHABUS ACCT #: 10759196 Admit Date: 11/11/05 Discharge Date: 11/19/05 Attending Physician: MESINA, CHRISTOPHER P.

			· ·	
			Charge Detail	
Service	Charge		31141g	
Date	Code	Qnt.	Description	Amoun≒
11/17/05	4128733	1.	ZOSYN INJ 3.37GM	110.00
11/17/05	4128733	1	ZOSYN INJ 3.37GM	110.00
11/17/C5	4128733	1	ZOSYN INJ 3.37GM	110.00
11/1 <sup>7</sup> /C5	4128553	1.	DILTIAZEM CD CAP 240MG UD	21.00
11/17/05	4121299	1	METOPROLOL TAB 50MG UD	5.00
11/17/05	4121299	1	METOPROLOL TAB 50MG UD	6.00
11/ <b>17</b> /05	4132578	1	ENSURE PLUS LIQ 240ML	17.00
11/17/05	4124366	1	VANCOMYCIN INJ 1GM	64.00
11/17/05	4120364	1	MORPHINE INJ 4MG/1ML UD	17.00
11/17/05	4120364	1	MORPHINE INJ 4MG/1ML UD	17.00
11/17/05	4120364	1	MORPHINE INJ 4MG/1ML UD	17.00
11/1 <sup>7</sup> /C5	4120364	1	MORPHINE INJ 4MG/1ML UD	17.00
11/17/C5	4121677	2	PERCOCET TAB UD	16.00
11/17/05	4121677	1	PERCOCET TAB UD	3,00
11/17/05	4121677	1	PERCOCET TAB ÚD	3.00
11/17/05	4121677	1	PERCOCET TAB UD	3.00
11/17/C5	4121677	2	PERCOCET TAB UD	16.00
11/17/05	4121677	1	PERCOCET TAB UD	5.00
11/1 <sup>7</sup> /05	4121677	1	PERCOCET TAB UD	3.00
11/17/05	4124366	1	VANCOMYCIN INJ 1GM	64.00
11/17/05	4167006	1	DEXTROSE 5% WATER LOOML	30.00
11/17/05	4167006	1	DEXTROSE 5% WATER 100ML	33.00
11/1 <sup>7</sup> /C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/l <sup>7</sup> /C5	41 <b>6</b> 7006	1	DEXTROSE 5% WATER 100ML	30.00
11/17/05	4167003	1	DEXTROSE 5% WATER 250ML	33.00
11/17/C5	4167003	1	DEXTROSE 5% WATER 250ML	33.00
11/17/C5	4360012	1	BASIC METABOLIC PANEL	45.00
11/1 <sup>7</sup> /C5	4390010	1	CBCA	35.00
11/17/05	4186110	1	MEDICAL SUPPLY 6 WEST	236.00
11/17/05		Şe	ervice Date Total:	2285.00
11/18/C5	3120002	1	6 TOWER PRIVATE	865.00
11/18/05	4125245	1	FAMOTIDINE TAB ZOMG UD	16.00
11/18/C5	4125245	1	FAMOTIDINE TAB 20MG UD	16.00
11/18/C5	4124346	1	ENOXAPARIN INJ. 40MG	123,00
11/18/C5	4128733	1	ZOSYN INJ 3.37GM	113.00
11/10/C5	4128733	1	ZOSYN INJ 3.37GM	110.00
11/18/C5	4128553	1	DILTIAZEM CD CAP 240MG UD	21.00
<b>11/18/</b> C5	4121299	1	METOPROLOL TAB 50MG UD	6.00
11/18/C5	4121299	1	METOPROLOL TAB 50MG UD	6.00

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Jackson Hospital & Clinic, Inc. 1725 Pine Street Montgomery, AL 36106-1117

Guarantor: Patient:

GRIFFIN, RONSHABUS 110 WALLAHATCHEE TALLASSEE, AL 36078

GRIFFIN, RONSHABUS ACCT #: 10759196 Admit Date: 11/11/05 Discharge Date: 11/19/05 Attending Physician: MESINA, CHRISTOPHER P.

### Charge Detail

			Charge Detail	
Service	Charge		-	
Date	Ccde	Qnt.	Description	Amount
11/18/05	4120008	,1	ACETAMINOPHEN TAB 650MG	0.00
11/18/C5	4121677	2	PERCOCET TAB UD	16.00
11/18/C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/18/C5	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/18/C5	4360012	1	BASIC METABOLIC PANEL	45.00
11/18/05	4390010	1	CBCA	35.00
11/18/C5	44CO912	1	BLOOD CULTURE	55.00
11/18/C5	4400912	1	BLOOD CULTURE	55.00
11/18/C5	44CO963	1	URINE CULTURE	45.00
11/18/05	4390029	1	URINALYSIS W/O SCOPE	15.00
11/18/05	4300614	1	CHEST 2 VIEWS	165.00
11/18/05	4186110	1	MEDICAL SUPPLY 6 WEST	236.00
11/18/05		2	ervice Date Total:	2005.00
11/19/05	4125245	1	FAMOTIDINE TAB 20MG UD	16.00
11/19/05	4124346	1	ENOXADARIN INJ. 40MG	123.00
11/19/05	4128733	1	ZOSYN INJ 3.37GM	110.00
11/19/05	4128553	1	DILTIAZEM CD CAP 240MG UD	21.00
11/19/05	4121299	1	METOPROLOL TAB 50MG UD	6.00
11/19/05	4132578	1	ENSURE PLUS IIQ 240ML	17.00
11/19/05	4167006	1	DEXTROSE 5% WATER 100ML	30.00
11/19/05	4390010	Д.	CBCA	35.00
11/19/05		\$6	ervice Date Total:	363.00

#### Charge Summary

Code	,	
110	ROOM-BOARD/PVT	4325.00
201	ICU/SURGICAL	4335.00
250	PHARMACY	7186.00
258	IV SOLUTIONS	1443.00
270	MED-SUR SUPPLIES	69.00
271	NONSTER SUPPLY	4069.00
272	STERILE SUPPLY	1730.00
300	LABORATORY OR (LAB)	565.00
301	LAB/CHEMISTRY	270.00
305	LAB/HEMATOLOGY	305.00
306	LAE/BACT-MICRO	200.00
307	LAB/UROLOGY	15.00
324	DX X-RAY/CHEST	1035.00

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Jackson Hospital & Clinic, Inc. 1725 Pine Street Montgomery, AL 36136-1117

Guarantor: GRIFFIN, RONSHABUS 110 WALLAHATCHEE TALLASSEE, AL 36078 Patient:

GRIFFIN, RONSHABUS ACCT #: 10759196
Admit Date: 11/11/05 Discharge Date: 11/19/05
Attending Physician: MESINA, CHRISTOPHER P.

Charge Summary

Code Revenue Description

	ough de pantier à	
Code	Revenue Description	
352	CT SCAN/BODY	1900.00
360	OR SERVICES	2060.00
370	ANESTHESIA	511.00
421	PHYS THERP/VISIT	55.0 <b>0</b>
424	PHYS THERP/EVAL	81.00
480	CARDIOLOGY	670.00
710	RECOVERY ROOM	1425.00
730	EKG/ECG	150.00
9€0	PRO FEE	405.00
985	PRO FTE/EKG	33.00

TOTAL CHARGES 32834.00

Payment and Adjustment Activity

rosting	Transaction	
Date	Description	
11/21/2005	FAYMENT PATIENT	-500.00
11/30/2005	ELUE CROSS CONTRACTUAL	-405.00
11/30/2005	ELUE CROSS CONTRACTUAL	-30.00
12/08/2005	FMT BLUE CROSS	-11400.00
12/08/2005	ELUE CROSS ADJUSTMENT	-17874.00
02/09/2006	FMT BLUE CROSS	-14183.10
02/09/2006	ELUE CROSS ADJUSTMENT	-17874.00
03/09/2006	FMT BLUE CROSS REVERSE	11400.00
03/09/2006	BLUE CROSS ADJUSTMENT REVERSE	15374.00
03/17/2006	BLUE CROSS CONTRACTUAL	-15374.00
03/17/2006	ELUE CROSS CONTRACTUAL REVERSE	17874.00
04/05/2006	FATIENT REFUND	155.10

TOTAL PAYMENTS AND ADJUSTMENTS: -32834.00

TOTAL AMOUNT DUE:

0.00